

California Department of Mental Health (DMH)
FREQUENTLY ASKED QUESTIONS
County Funding Requests for MHSA Community Program
Planning
Updated February 8, 2005

What is MHSA Community Program Planning?

Welfare and Institutions Code (WIC) § 5848 requires counties to develop an Integrated Plan for MHSA services in partnership “with local stakeholders including adults and seniors with severe mental illness, families of children, adults and seniors with severe mental illness, providers of services, law enforcement agencies, education, social services agencies and other important interests.”

What is the purpose of this Community Program Planning?

The purpose of Community Program Planning is to provide a structure and process counties can use, in partnership with their stakeholders, in determining how best to utilize funds that will eventually become available for Community Services and Supports, a critical component of the MHSA.

In mid-February 2005, DMH will release for public input draft requirements for the Community Services and Supports plan itself. This is a plan counties must submit to obtain MHSA funds to expand and enhance services to their local public mental health community. The Funding Request is intended to help counties develop a Community Program Planning process that can be used when it is ready to begin preparing the actual Community Services and Supports plans.

DMH realizes it is asking counties and their stakeholders to develop a planning process with only partial knowledge and understanding of the scope of the Community Services and Supports plan itself. However, counties can begin to assess immediately the unmet mental health needs and the impacts of those needs on clients, families and communities.

What must counties do to obtain funding for Community Program Planning?

On January 18, 2005, DMH posted [DMH Letter 05-01](#) on its website (www.dmh.ca.gov) called “County Funding Requests for Mental Health Services Act Community Program Planning.” It includes: requirements counties must meet to receive funding for planning, a table showing the maximum planning

dollars available to each county, an explanation of allowable costs that can be charged and a budget worksheet.

The Funding Request must show how each county will develop Community Program Planning that meets the following four criteria:

1. Community Program Planning must include clients and families.
2. Community Program Planning must be comprehensive and representative.
3. There must be clear designation of responsibility within the county for Community Program Planning and the planning process must be adequately staffed to be successful and inclusive.
4. Full participation in Community Program Planning requires training of stakeholders and staff in advance.

How will DMH evaluate the Funding Requests?

The Funding Requests will be evaluated by state DMH staff with input from clients and family members. Reviewers will determine if the proposed Community Program Plan:

1. Reflects the scope of the MHSA
2. Is complete and responsive to DMH Letter 05-01 requirements
3. Describes reasonable county planning activities in light of the funds being requested.

How detailed does the Funding Request have to be and when is it due to DMH?

DMH expects the Funding Requests to be 8-10 pages in length. The final deadline for all Funding Requests is March 15, 2005. Some counties are already in the midst of their planning process. These counties may submit their requests by February 15, 2005 and DMH will review them early. No matter which date the county chooses to submit its Funding Request, DMH will respond with approval or disapproval of the Request within thirty days of its receipt in Sacramento.

If my county doesn't submit its plan until March 15, 2005, is there a possibility that all the planning money will have already been granted to counties that submit their Funding Requests earlier?

No. DMH has determined a maximum amount each county can receive in DMH Letter 05-01. This designated amount will be held for each county until its Funding Request is completed and approved. A total of \$12,700,000 is available for the state as a whole, not including any planning costs of DMH itself.

DMH does not guarantee a county will receive all of the funding reserved for it as shown in Attachment B of DMH Letter 05-01. This is a maximum amount. The county's Funding Request must meet all the evaluation criteria mentioned above to receive funding.

How did DMH determine the amount of money for Community Program Planning that each county would receive?

DMH allocated funds by providing a minimum of \$75,000 to every county and the City of Berkeley. This ensures that small counties have enough to cover basic planning requirements. The balance of the funding distribution is based on the county's proportion of the statewide prevalence of serious mental illness/serious emotional disturbance in households under 200 percent of the Federal Poverty Level.

What does "prevalence" mean?

Prevalence means the estimated occurrence of a condition in the general population as a whole. For example, in any given population of people, it can be expected that some percent of them will have red hair or brown eyes. In this case, researchers have determined an approximate percent of occurrence of serious mental illness/serious emotional disturbance in the population of households with incomes under a certain amount. Beyond the minimum \$75,000, DMH divided the funds between counties based on this statistically estimated occurrence of serious mental illness/serious emotional disturbance.

Prevalence has nothing to do with the level of services already being delivered to clients and families by a particular county or its providers.

Will all future MHSA funding be distributed using the same formula?

No. This allocation formula applies only to Funding Requests for Community Program Planning.

How long does a county have to spend its planning funds once it is received?

The county needs to make the funding last from the start of its Community Program Planning until the county develops and submits its MHSA Community Services and Supports plan to DMH. If some of the planning money is left over once the Community Services and Supports plan is submitted, the remainder can be used for expenditures for promotion of system change consistent with the MHSA.

What if a county is already in the planning process before its Funding Request is approved?

Counties that have already started planning before their Funding Request is approved must ensure that the early expenditure(s) are consistent with the purpose and intent of the MHSA and the content of the Funding Request once it is submitted to DMH. Expenditures that do not meet these criteria will be disallowed. For further information, consult the MHSA web page on the DMH website to read a letter from Dr. Stephen Mayberg, Director of DMH, on this subject that was posted on December 31, 2004.

Counties may not under any circumstances charge any expenditure that occurred before January 1, 2005, the date when the MHSA officially became state law.

What are allowable expenses that can be charged?

The MHSA in WIC § 5892(c) allows mental health programs to pay for “the costs of consumers, family members and other stakeholders to participate in the planning process and for the planning and implementation required for private provider contracts to be significantly enlarged” to provide any new MHSA services or expanded service population.

WIC § 5891 directs that MHSA “funds shall not be used to supplant existing state or county funds utilized to provide mental health services.” DMH Letter 05-01 states further that allowable costs are the additional costs incurred by counties to plan for the MHSA. The MHSA-related costs for staff that have been redirected for at least 50% of their time to the MHSA planning effort are also eligible for funding. Increased overhead costs associated with the Community Program Planning process and consistent with a cost allocation plan are also allowable up to a maximum of 15 percent of the total MHSA set aside for each county for planning purposes. (DMH Letter 05-01 - Attachment B, page 1)

Additional questions and answers about Funding Requests and Community Program Planning will be added as issues arise. If you have additional questions, email them to MHSA@dmh.ca.gov or leave your question on the MHSA Toll-free Phone Line, 1-800-972-MHSA (972-6472).